PART B-ISSUE FEE TRANSMITTAL **Box ISSUE FEE** Complete and mail this form, together with i.) fees, to: Assistant Commissioner for Patent's Washington, D.C. 20231 MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks/1 Note: The certificate of mailing below can only be used for domestic through 4 should be completed where appropriate. All further correspondence including the Issue Fée mailings of the Issue Fee Transmittal. This certificate cannot be used Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current for any other accompanying papers. Each additional paper, such as an correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for assignment or formal drawing, must have its own certificate of mailing. **Certificate of Mailing** maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class C5M1/0813 mail in an envelope addressed to the Box Issue Fee address above on the date indicated below. ROBERT J FOX FITCH EVEN TABIN & FLANNERY 135 SOUTH LASALLE STREET SUITE 900 ľúmothv Leystik (Depositor's name) CHICAGO IL 606\$3-4277 (Signature) (Date) TOTAL CLAIMS **EXAMINER AND GROUP ART UNIT DATE MAILED** APPLICATION NO. **FILING DATE** 08/829,742\ 03/31/97 004 COHEN, C 3509 08/13/97 First Named SIEGLER, MARK D. Applicant TITLE OF JACK SHAFT GARAGE DOOR OPERATOR INVENTION ATTY'S DOCKET NO. APPLN. TYPE SMALL ENTITY **FEE DUE CLASS-SUBCLASS** BATCH NO. **DATE DUE** 3 60611 049-199.000 **Q36** UTILITY NO \$1290.00 11/13/97 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent Use of PTO form(s) and Customer Number are recommended, but not required. 1<u>FITCH, EVEN, TABI</u>N attorneys or agents OR, alternatively, (2) the name of a single firm (having as a ☐ Change of correspondence address (or Change of Correspondence Address form member a registered attorney or agent) 2& FLANNERY PTO/SB/122) attached. and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached. attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 4a. The following fees are enclosed (make check payable to Commissioner PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. of Patents and Trademarks): Inclusion of assignee data is only appropiate when an assignment has been previously submitted to 🔀 Issue Fee the PTO or is being submitted under separate cover. Completion of this form is NOT a substitue for Advance Order - # of Copies_ filing an assignment. (A) NAME OF ASSIGNEE THE CHAMBERLAIN GROUP, (B) RESIDENCE: (CITY & STATE OR COUNTRY) 4b. The following fees or deficiency in these fees should be charged to: <u>06-1135</u> DEPOSIT ACCOUNT NUMBER _ Elmhurst, IL (ENCLOSE AN EXTRA COPY OF THIS FORM) Please check the appropriate assignee category indicated below (will not be printed on the patent) S Issue Fee conporation or other private group entity ☐ individual government g S Advance Order - # of Copies The COMMISSIONER OF ATENTS AND THAT DEMARKS IS requested to apply the Issue Fee to the application identified above. (Authorized Signature) NOTE; The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office. Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary 11/05/1997 LBERGER 00000353 08829742 depending on the needs of the individual case. Any comments on the amount of time required 01 FC:142 1290.00 OP to complete this form should be sent to the Chief Information Officer, Patent and Trademark 02 FC:561 Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.